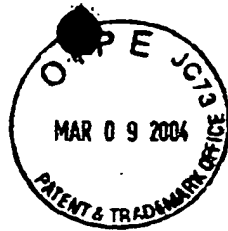


03500.015009.



PATENT APPLICATION

SA
3-16-04

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

HIDENORI TAKATA

Application No.: 09/742,413

Filed: December 22, 2000

For: INFORMATION MANAGEMENT)
APPARATUS, INFORMATION :
MANAGEMENT SYSTEM, AND)
INFORMATION MANAGEMENT :
SOFTWARE)

Examiner: Bryce P. Bonzo

Group Art Unit: 2184

March 8, 2004

RECEIVED

MAR 12 2004

Technology Center 2100

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated October 9, 2003, the period for response to which having been extended two months from January 9, 2004 to March 9, 2004 by the accompanying Petition For Extension Of Time, please amend the above-identified application as follows.

03/11/2004 CCHWU1 00000102 09742413

02 FC:1201

86.00 DP

02/28/2005 CCURTIS 00000002 061205 09742413

01 FC:1201

86.00 DA

In re Application of:

HIDENORI TAKATA

Application No.: 09/742,413

Filed: December 22, 2000

For: INFORMATION MANAGEMENT APPARATUS,
INFORMATION MANAGEMENT SYSTEM, AND
INFORMATION MANAGEMENT SOFTWARE

Docket No. 03500.015009.

Examiner: Bryce P. Bonzo

Group Art Unit: 2184

Date: March 8, 2004

THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

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MAR 12 2004

Technology Center 2100

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 16	MINUS	** 20	= 0	x \$9 \$18	0
INDEP. CLAIMS	* 5	MINUS	*** 4	= 1	x \$43 \$86	\$86.00
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$86.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☒ A check in the amount of \$ 86.00 is enclosed.
- ☐ Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☒ A check in the amount of \$ 420.00 to cover the fee for a two month extension is enclosed.
- ☐ A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Attorney for Applicant

Registration No. 39,000

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200